



Joint area review

Bristol children's services authority area

**Better
education
and care**

Review of services for children and young people

Adult Learning Inspectorate
Audit Commission
Commission for Social Care Inspection (CSCI)
Healthcare Commission
HM Crown Prosecution Service Inspectorate
HM Inspectorate of Constabulary
HM Inspectorate of Court Administration
HM Inspectorate of Prisons
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Introduction

1. This joint area review was conducted using the arrangements required under Section 20 of the Children Act 2004. It was carried out by a multidisciplinary team of eleven inspectors from the Office for Standards in Education (Ofsted), the Commission for Social Care Inspection (CSCI), the Healthcare Commission (CHAI), and the Audit Commission. The review was undertaken according to the requirements of the *Framework for the Inspection of Children's Services*.
2. The review was linked to the contemporaneous corporate assessment of the local council by the Audit Commission and its findings are represented in the relevant part of the corporate assessment report.
3. This review describes the outcomes achieved by children and young people growing up in the Bristol area and evaluates the way local services, taken together, contribute to their well-being. Joint area reviews focus on the extent to which children and young people are healthy, safe, enjoy and achieve, make a positive contribution, and are well prepared to secure economic well-being.
4. The review evaluates the collective contribution made to each outcome for children and young people by relevant services in the area. It also judges the contributions made by the council's services overall and, specifically, its education and children's social care services. Particular attention is given to joint action by local services on behalf of those groups of children and young people who are vulnerable to poor outcomes. Two such groups are covered in detail: children and young people who are looked after by the council; and children and young people with learning difficulties and/or disabilities.
5. The review took place in two stages consisting in total of three weeks over a seven-week period. The first stage reviewed all existing evidence including:
 - the self-assessment undertaken by local public service providers
 - a survey of children and young people
 - performance data
 - the findings of the contemporaneous inspection of the youth service
 - planning documents
 - information from the inspection of local settings, such as schools and day care provision
 - evidence gathered during the earlier inspection of the youth offending team
 - briefings from staff within inspectorates, commissions and other public bodies in contact with local providers.
6. The second stage included inspection fieldwork. This included studies of how far local services have improved outcomes for a small sample of children and young people, some of whom have the most complex needs, and a study of provision in one neighbourhood, Knowle West. It also included gathering

evidence on nine key judgements and eight key themes, selected because of their critical importance to improving outcomes for children and young people in the local area. This included discussions with elected members of the local authority and their equivalents in other public agencies, officers from these agencies, service users, and community representatives. A review of case files for children and young people receiving support from a number of local agencies was also included.

Context

7. Bristol is the eighth largest city in the country and the biggest in the south west of England. Over 91% of its 393,000 population is white and most of the remaining 9% is of black or Asian heritage. Children and young people aged 0-19 make up a quarter of the population, with just under a fifth under 16. Around 20% of children and young people in Bristol schools are from minority ethnic communities. The city provides 24% of the region's employment. Unemployment at 3.1% is just below the national average.

8. Although Bristol is a relatively wealthy city with some particularly affluent areas, its prosperity is unevenly distributed and characterised by extremes. Around 12% of the population lives in the most deprived 10% of wards in the country, including two, Lawrence Hill and Filwood, which are in the worst 1% and have particularly high levels of child poverty, unemployment, crime, health problems and poor housing. The percentage of adults with higher education qualifications is relatively high, but around 28% of residents have limited or no qualifications. In 20% of wards, over half of children live in families that claim means-tested benefits. The proportion of children entitled to free school meals is above the national average in primary schools, although for secondary schools it is in line with the national level.

9. Despite a steady increase in housing provision over recent years, around 5% of all homes in the city are unfit for habitation. The highest concentration of these is in Easton, Lawrence Hill and St George, areas which also have the highest concentrations of children and young people. Over a quarter of dependent children live with lone parents, compared to the national average of 6%. Just below 1% of children are young carers. Crime is approximately one case per 1000 and youth crime in the city is falling.

10. Bristol city council became a unitary authority following local government reorganisation in April 1996. Since 2003, no single political party has had an overall majority on the council. Following a period when various political parties shared control, Liberal Democrats currently lead the council as a minority administration. A new director of education took up post in September 2004 (the fourth director in three years). She has now been appointed as director of children's services (designate), to be responsible for integrated services for children and young people from April 2006.

11. The authority maintains 160 schools. Many are located in post-war housing estates on the edge of the city, where demographic changes have meant a falling demand for school places. In the central and inner areas of the city, where there has been significant housing redevelopment, there is considerable pressure on places. There are 15 nursery, 23 infant, 22 junior and 73 primary schools. All 17 secondary schools have comprehensive intakes, but only serve about three-quarters of Bristol's children, as many parents choose to educate their children either in the independent sector or in schools outside the city. There are 10 special schools and four pupil referral units. Overall, 9.2% of pupils have English as an additional language, although the proportion is higher in the early years and the primary phase. The proportion of children with statements of special educational need is well above the national average.

12. Post-16 education and training is provided by two further education colleges, five school-based sixth forms, a sixth-form college and a range of work-based training providers. A 14-19 education and training strategy has been developed by the local authority in partnership with the local learning and skills council, colleges, training providers and schools. Entry-to-employment (E2E) provision is managed by a local consortium. Adult and community learning, including family learning, is provided by a college and the council's community learning service.

13. Children's social care services are provided by the city council, which has corporate parenting responsibility for 535 looked after children. Additional support for vulnerable groups is provided by a network of independent and voluntary providers, in some cases working in partnership with the council. Health services for children are provided by seven different health organisations, including two primary care trusts.

14. The current ambitions for Bristol have been set out by the local strategic partnership (LSP). The Children and Young People's Trust Partnership (CYPTP), as a subgroup of the LSP, forms part of the interim arrangement for a children's trust. It is expected that the CYPTP will assume the role of a full trust from April 2006.

Summary Report

Outcomes for children and young people

15. **Most outcomes for children and young people are adequate, but the levels at which young people achieve in Bristol schools are inadequate.** Although most children are healthy, there is significant variability in children's health between different parts of the city. Overall, children and young people are safe and those most at risk are generally well protected. Most young people behave responsibly and many contribute both to school life and to developments in their local communities, but too many have limited aspirations. Attendance rates at school and the educational standards achieved by many

children and young people, including looked after children and children from minority ethnic groups, are too low. Poor educational standards up to the age of 16 impede the preparation of young people for working life, so that the proportion achieving adequate skill levels by the age of 19, although improving, is below national figures. As a consequence, although most young people find employment in and around Bristol quite easily, many find themselves in low level jobs with little prospect of advancement or progression.

The impact of local services

16. Services to support children and young people vary in quality; while some are good, there are others where their effectiveness is either unclear or inadequate. The authority and its partners know and understand the needs of the local area well and the findings of this review broadly corroborate the strengths and weaknesses identified in their self-assessment. However, too often the monitoring and evaluation of services focus insufficiently on outcomes for children and young people and their impact is, therefore, frequently not evident. In the case of the council, corporate plans are not being consistently translated into actions and outcomes, and there is a lack of shared understanding of how different departments can help to improve services. Voluntary agencies are making a useful contribution to supporting vulnerable children, but often their efforts are not sufficiently integrated with those of the council.

Being healthy

17. The combined work of all local services in securing the health of children and young people is adequate. The need to reduce the significant health inequalities in the city is well recognised by all agencies and there is a wide range of initiatives in place aimed, for example, at reducing teenage pregnancy, drug misuse and smoking. Various strategies are helping children to gain a good start in life. The development of midwife-led delivery units within the acute hospitals is helping improve maternity provision and there is good multi-agency support around breastfeeding. Several initiatives encourage healthy eating. There are, however, significant gaps in Child and Adolescent Mental Health Service (CAMHS) provision and arrangements for children with chronic conditions, which means that transition into adult care are not managed consistently.

18. Partnership working between agencies is established in many services. However, improvements in outcomes for children and young people, including reductions in teenage conceptions and drug misuse, are not readily apparent. Inadequate use is made of data to evaluate the effectiveness of services and this is impeding both service development and health promotion work. Steps have recently been taken to strengthen the strategic contribution of health agencies to improving children's services and clear criteria are now in place to evaluate the suitability of projects for wider development. Arrangements to meet the health needs of looked after children are effective and children who are disabled, ill or

in need of emergency treatment generally receive suitable care in age-appropriate facilities.

Staying safe

19. **The work of all local services in keeping children and young people safe is adequate.** Multi-agency safeguarding arrangements for the most vulnerable children and young people are satisfactory overall and the new Safeguarding Board (which recently replaced the Area Child Protection Committee) generally provides clear leadership on safeguarding issues. Determined action to reduce the number of looked after children is starting to be effective. Much useful community profiling and needs analysis have helped to shape both the arrangements for the interim children's trust and the development, coordination and delivery of preventive services. Although there is no detailed strategic preventive plan, there are good examples of innovative services anticipating young people's needs. Inter-agency work with schools and communities where bullying and racial harassment are issues is also effective.

20. The picture is satisfactory overall, but there are several key areas where improvement is needed. Thresholds used to assess risk and facilitate access to children's social care services vary. Although there are common procedures for reporting incidents of domestic abuse where children are involved, the responses to these are not consistent. This is also true for instances of emotional abuse and neglect of children, an area which has not yet been the subject of specific and focused training. The audit to ensure compliance with the recommendations and standards set out in the Victoria Climbié Inquiry has not been updated during the last two years. Arrangements to ensure agencies comply with secure staff recruitment meet legal requirements, but are not applied consistently.

Enjoying and achieving

21. **The overall contribution of services to helping children and young people in Bristol schools to enjoy their education and recreation and to achieve well is inadequate.** Actions are being taken to improve the quality of services provided for children and young people, but, these have not yet had sufficient impact on raising achievement. The standards achieved by children and young people in national tests and public examinations up to the age of 16 are well below those found nationally and in similar authorities, and are unsatisfactory. In both primary and secondary schools, too many young people make insufficient progress in their learning. Early years provision is of good quality. Parents and carers of young children receive good support through Sure Start and the children's centres, particularly in the more disadvantaged neighbourhoods. New systems have been introduced by the local authority to support and intervene in schools causing concern, but the proportion of schools with serious weaknesses or requiring special measures to improve is higher than in similar authorities. Support to help schools improve pupil behaviour is well-targeted. However, the number of permanent exclusions remains high for older pupils and the rate of fixed-term exclusions is very high, including for a

significant proportion of children from black or minority ethnic backgrounds, particularly at primary level.

22. Recreational and voluntary learning opportunities, including those based in schools and particularly in sport and art, are good overall. Nonetheless, some of the more disadvantaged areas of the city are poorly served by recreational facilities, even though they have a high proportion of young people.

23. Educational support for looked after children is adequate with some good features, but support for young carers is inadequate. Provision for children and young people with learning difficulties and/or disabilities is satisfactory overall. However, the proportion of young people who have statements of special educational need is high and statements are issued too slowly.

Making a positive contribution

24. **The work of all local services in helping children and young people to contribute to society is good.** Services do much to assist children and young people in developing socially and emotionally and many are well supported through mentoring schemes and other support projects which help to raise their self-esteem and enable them to respond to challenges in their lives. However, the outcomes of projects are not sufficiently well evaluated and this limits the demonstration of impact and impedes the sharing of good practice. Good opportunities are provided for children and young people to be involved in decision-making on issues which affect them. They are positively encouraged to share their views and have been influential recently in helping to re-shape a number of services. The framework for the participation and involvement of young people is set out in the area-wide strategy 'Hear by Right in Bristol'. Action taken through the youth inclusion programmes and support panels is effective in addressing anti-social behaviour and reducing the escalation of offences by children and young people.

25. The Education of Children Looked After Service (ECLAS) and the education workers in the Care and After Team provide effective support to improve school attendance for individual looked after children and ensure that support is co-ordinated. Looked after children are encouraged to express and share their views through their own magazine and elected members make a significant contribution to their support. Effective support is provided for children and young people with learning difficulties and/or disabilities. Their views are positively sought and they are involved in developing appropriate transition procedures to help them through education and into adult life.

Achieving economic well-being

26. **The work of all local services in helping children and young people achieve economic well-being is adequate.** Progress has been made in addressing some longstanding weaknesses and, compared to similar cities, a high and increasing proportion of young people aged 16–19 engages in education, employment and training. However, the quality of their provision

remains too variable. Although some training providers contribute to 14-19 planning, employers have limited involvement in developing learning programmes for young people. Work-based learning for 14-19 year-olds is increasing, but patterns vary too widely across the city.

27. The new 14–19 strategy provides a detailed framework for development and the recent reconfiguration of the 14–19 partnership has helped to improve co-ordination and collaboration between institutions and provides a good basis for further improvement. Curriculum opportunities have increased and greater flexibility and choice are offered at key transition points. A diverse range of initiatives ensures that young people excluded or at risk of exclusion are able to remain engaged in learning. However, a significant group of young people has low expectations of education and training, and the proportion of 19 year-olds achieving qualifications equivalent to at least five or more good GCSE grades is below average.

28. There are clear strategic priorities for the development of early years and child care services, which focus effectively on early intervention with vulnerable families. Positive steps are taken to ensure parents are well supported and informed about the range of services available. Neighbourhood renewal programmes are well targeted and underpinned by a comprehensive analysis of need. Effective partnership work supports young people and families who are homeless or require housing services. However, too many families with children are living in unsuitable homes and housing provision and support for young people with complex needs are limited. Appropriate arrangements are in place to support care leavers and young people with learning difficulties and/or disabilities in developing and implementing their pathway and transition plans.

Service management and capacity to improve

29. **Although, the management of services for children and young people is adequate overall, there are some important weaknesses.** Some services are performing well, for example early years, the youth service and the youth offending service; however, this is offset by significant weaknesses in the other educational services and variability in the quality of children's social care. There are clear ambitions and a developing commitment from all agencies to integrate and improve children's services. These have been translated into priorities, but a shared understanding, including among partners, of how to interpret the city's vision, priorities and needs in terms of respective roles and responsibilities, is not yet secure. Overall, the city council and its partners have adequate capacity to deliver current services; however, the capacity of some services is being limited by underdeveloped collaboration between providers.

30. In many of its key services for children and young people, Bristol is not achieving good value for money. Performance is being impeded by a number of factors. The council's performance management is inadequate; there are inconsistencies in the quality of performance monitoring and quality assurance is not securely embedded. Information sharing with other agencies is patchy and

scrutiny arrangements are not yet sufficiently challenging. For social care, the council is strengthening its strategic commissioning to improve service mix and to maximise its use of resources. In education, the recent re-focussing of services is designed to deploy resources more deliberately to raise standards. Better relations with headteachers and governors, and improvements in arrangements to support and challenge schools, reflect the improved and more focused strategic leadership of the council's education department.

31. The self-assessment submitted by Bristol as part of this review provided a reasonably accurate evaluation of its strengths and weaknesses, including acknowledging the shortcomings in young people's educational achievements. However, it overestimated the city's capacity to address the difficulties identified and to sustain the momentum of successful recent developments. Although Bristol has put in place interim arrangements signalling its intentions to develop an integrated children's service, there is not yet a common view among partners at either strategic or operational level on how and at what pace this should develop. The weight being placed on the shoulders of the director of children's services (designate) to raise standards in schools, while moving forward the integration agenda, is considerable. Staffing resources to match the requirements of the new integrated service are also not yet secure.

32. A consultant has been commissioned to support the implementation of the integrated children's service and the council is reorganising its staffing structure to match the new children's agenda. However, the council's capacity to maintain the momentum for change is limited by underdeveloped workforce planning and variable human resources support. Uncertainty about the implications of the changes is also affecting staff confidence. Much of the activity represents 'work in progress' and the council still has a long way to go to achieve its objectives. Although improvements have been made recently, these are fragile.

33. Given the poor educational outcomes, the nature of some of the social care issues that need addressing, the weaknesses in performance management and workforce planning, and the uncertainty surrounding the implementation of the integrated children's service, the current capacity of the city council to improve outcomes for children and young people on its own is inadequate. The council's track record over many years in improving outcomes in education is poor and deep-rooted problems must be overcome if there is to be sustained improvement. In children's social services, management of change has been slow. The council now has a good understanding of what needs to be improved, but is unable to demonstrate consistently that its approaches are leading to real gains for young people.

34. **The council and its partners together have adequate capacity to secure the improvements for children and young people that are required.** The contributions made to improving the outcomes for children by other agencies, at both strategic and operational levels, are significant. Bristol's capacity to improve services depends on the council's ability to consolidate and build upon these partnerships. Alongside Bristol's successful services, there are

many others, including ones provided by the council, where there are clear signs that the city's collective commitment to make things better for young people is being rewarded by flourishing 'green shoots'. These appear to be indicators of real improvement beginning to take root. Ultimately, the extent that this is the case will be the true test of Bristol's capacity to secure and sustain the best deal for children and young people in the city.

Grades

Grades awarded:

4: outstanding; 3: good; 2: adequate; 1: inadequate

	Local services overall	Council services	Health services
Being healthy	2		
Staying safe	2		
Enjoying and achieving	1		
Making a positive contribution	3		
Achieving economic well-being	2		
Service management	2		
Capacity to improve	2	1	
Children's services		1	
The education service		1	
The social care services for children		2	
The health service for children			2

Recommendations

For immediate action

- (The council) Increase the capacity for improving children's services, in particular education, by consolidating and developing strategic partnerships developed with outside bodies and agencies.
- (Through the Children's Safeguarding Board) Ensure that the review of safeguarding compliance against the recommendations of the Victoria Climbié Inquiry is updated.

For action over the next six months

- (The council) Improve the understanding of the respective roles and responsibilities of the council and its partners in improving children's services.
- (The council and its partners) Improve the quality of performance management by:
 - strengthening the council's scrutiny function for children services
 - increasing the use made of data to evaluate the effectiveness of health services and to inform health service development and health promotion work
 - ensuring that the management information systems of all partners are compatible and that a formalised system for passing and sharing operational information is developed
 - improving the monitoring and evaluation of services and projects, focussing specifically on outcomes for children and young people and value for money
 - improving human resources support and workforce planning.
- (Through the Children's Trust and Safeguarding Board) Ensure in partnership with the Domestic Abuse Forum, that:
 - measures to reduce the impact of domestic abuse on children and young people are given due prominence in future strategy development
 - particular focus is given to multi-agency training and development on emotional abuse and neglect
 - steps are taken to improve the equity of response to the cases where emotional abuse and neglect are suspected.

For action in the longer term

- (The council, schools and colleges) Raise standards of attainment of children and young people as measured, for example, by the proportion of young people achieving qualifications equivalent to five good GCSE passes at age 16 and by age 19, by:
 - improving the rates of attendance and progress made by pupils in both primary and secondary schools
 - developing more rigorous quality assurance processes to ensure that all teaching and learning up to the age of 19 is of a high standard
 - reducing the number of permanent and fixed term exclusions
 - securing improvement in the performance of underachieving groups, including looked after and black and other minority ethnic children
 - ensuring statements of educational need are issued within the recommended time scales
 - taking action to raise the aspirations of all children, young people, parents and carers and ensure they are well informed about the education, training and employment opportunities available
 - improving support for young carers.

- (Health service providers) Improve the quality of healthcare for children and young people, by:
 - ensuring greater equity of health service provision so that children and young people who need services can readily access them wherever they live in the city
 - addressing the significant gaps in mental health provision and improving arrangements for children with chronic conditions when they make the transition into adult care.

- (The council) Improve the recreational facilities for children and young people in some of the more disadvantaged areas of the city.

- (The council, schools and colleges) Improve the access to work-related learning for 14-19 year-olds through improved collaboration with employers and training providers.

- (The council) Improve housing provision and support services for young people with complex needs and reduce the proportion of families with children living in unsuitable homes.

Main Report

Outcomes for children and young people

35. Although most outcomes for children and young people in Bristol are adequate, the educational standards achieved in Bristol's schools are much too low and are inadequate.

36. **Children and young people are generally healthy, but patterns vary widely across the city.** Comparisons with national data suggest that a typical child or young person in Bristol enjoys good health. For many children and young people, this is the case. However, there are significant health inequalities, whereby many children and young people grow up amidst high levels of deprivation and with significantly worse health outcomes than in other, more affluent, parts of the city.

37. Some areas have high rates of smoking and 42% of women in the city smoke during pregnancy. The percentage of babies with low birth weight is below the national average but the trend is deteriorating in Windmill Hill and Knowle West. Mortality rates for infants are similar to national averages, but those for children under 15 years are below the national average. Breastfeeding rates are significantly higher than average and, although women in deprived areas are less likely to breastfeed their babies, those continuing to do so six to eight weeks after giving birth have increased to 30% in Knowle West.

38. Immunisation rates at two and five years are significantly below average in some areas. The incidence of whooping cough is above average and the occurrence of measles and mumps is increasing. Half of children aged five have some decayed teeth and the proportion of children with more than two decayed is well above national targets. The number of obese children is similar to national averages. Traffic pollution exceeds government standards in much of the city and rates of asthma or wheezing among children and young people can be as high as 40% in some parts. Over 30% of households contain a smoker. The number of young people who have taken at least one drug is above average and alcohol use is increasing. Numbers misusing substances are also high, although the proportion receiving treatment is below average.

39. Fewer children than average are admitted to hospital for illness, but the number of planned and emergency admissions varies widely between districts. Children are seen quickly in the city's main accident and emergency departments with above average numbers either admitted to hospital or discharged within an hour. General practitioners are providing a good service in diagnosing 41% of chlamydia cases. Teenage conception rates are above average and not declining, and 20% of teenage mothers have a second baby before they reach the age of 18. The percentage of looked after children receiving an annual health assessment has increased to 80%.

40. **Children and young people are generally safe in Bristol. However, their experiences vary according to where they live in the city.** Families are mostly well supported by the main agencies to keep children safe.

Arrangements for the safety of looked after children, including placement stability, are generally good, as is the number of children adopted from care. Over two-thirds are placed with 'in house' foster carers, although a significant number live well outside the city. Systems to minimise the incidence of child abuse are satisfactory and the level of child protection registrations is in line with similar areas. All children and young people on the child protection register have an allocated social worker and reviews are managed in a timely way. The number of looked after children missing at any one time from school is, however, too high.

41. The rate at which core assessments are being completed is improving, albeit from a low baseline. Thresholds used to assess risk and facilitate access to children's social care services vary across the city and this leads to some variability in response. Reported levels of domestic abuse incidents are high in some of the more deprived parts of the city. Although there are common procedures for reporting such incidents where children are involved, the responses to these are not consistent.

42. Road traffic accidents are generally below the national average, though are higher where traffic is busiest. Street crime and fear of crime are significant concerns for many young people, particularly those in the more deprived districts. Levels of bullying in schools are generally low, but vary between schools. Where bullying occurs, appropriate action is taken. The incidence of bullying and racial harassment is monitored effectively by the local authority and reported to both the Scrutiny Commission and/or the Race Equality Forum.

43. **The achievement of children and young people is inadequate.** The educational standards achieved by children up to the age of 16 are below average. Too many children and young people make unsatisfactory progress from primary to secondary school and insufficient value is added to their learning. The proportion of young people gaining five or more GCSE passes at grades A*-C was the lowest in England in 2005. A significant feature of outcomes at age 16 is that more young people than elsewhere fail to gain any qualifications. The achievement of black and minority ethnic groups shows some recent improvement but remains significantly below that of their white peers. A high proportion of looked after children leaves school at 16 with no qualifications. Children and young people with learning difficulties and/or disabilities make relatively satisfactory progress.

44. Early years' provision is of good quality and prepares children well for school. However, by the age of five, girls achieve better than boys in all areas of learning. Although many children enjoy school, attendance in primary and secondary schools is below national figures and those of similar authorities. Permanent exclusions have reduced in primary schools and at Key Stage 3, but have increased at Key Stage 4. The proportion of fixed-term exclusions is very

high and includes a high proportion of children and young people from black and minority ethnic backgrounds.

45. Children and young people have a good range of opportunities to make decisions and take personal responsibility, and many make a good contribution to their communities. Consultation with children and young people is promoted effectively and various services use a range of mechanisms to seek young people's views. Specific action has ensured that children and young people with learning difficulties and/or disabilities are consulted on, and can influence, the transition arrangements in place for them as they move through education into adult life. The views of children and young people are also now taken into account more consistently and recorded at case reviews. Most young people consider that they can influence decision-making processes, both in their school and their community.

46. Behaviour issues are effectively addressed through school-based projects and personalised programmes supported by good multi-agency partnerships. The University of the 1st Age has been very effective in helping many young people develop leadership and peer-tutoring skills. Youth crime is reducing, even though there has been an increase in the number of looked after children receiving a reprimand or final warning in the past 12 months. Multi-agency projects, Sure Start, voluntary agencies and family link workers appear effective in supporting parents and carers in improving relationships with children and young people and in helping them to manage challenging situations. However, the outcomes of these projects are not being effectively evaluated and this is limiting their demonstrable impact.

47. Children and young people are able to achieve economic well being and are prepared adequately for working life. Young people have access to a range of initiatives which help prepare them for life after school and most make good use of information, advice and guidance services. Compared to similar cities, a high and increasing proportion of 16-19 year-olds engages in education, employment and training. Success and retention rates in local colleges have improved steadily over the past four years and are generally above the national benchmark. Participation in work-based learning is increasing as is progression to higher education, although patterns vary across the city. Young people with learning difficulties and/or disabilities and those looked after have adequate support to enable them to progress.

48. However, a significant group of young people has low expectations of education and training and the proportion of 19 year-olds achieving qualifications equivalent to at least five or more good GCSE grades is below average. In school sixth forms, overall achievement is below similar authorities and the proportion of young offenders in education, employment and training is low. The shortage of affordable housing affects many young people, but those with complex needs face particular difficulties in finding a decent place to live.

The impact of local services

Being healthy

49. **The combined work of all local services in securing the health of children and young people is adequate.** Steps have been taken recently to strengthen the health input to the strategic agenda for improving children's services. The need to reduce the significant health inequalities in the city is well recognised by all agencies and there is a wide range of initiatives in place to address these. However, while partnership working between agencies is established in many services, improvements to outcomes for children and young people, even in key priority areas such as reducing teenage conceptions and drug misuse, are not readily evident. In the past, projects have not been well evaluated, and use of data to inform service development and health promotion work has been underdeveloped. New and clearer criteria for evaluating the suitability of projects for development as mainstream services are intended to address this.

50. Multi-agency working is hampered by different interpretations among agencies about when to refer young people and the thresholds for treatment. Although staff are positive about the changes set out in the 'change for children' agenda, there are anxieties around the practicalities of how the new services will work and how practical problems will be resolved. Many workforce issues linked to further service development, for example to meet national recommendations on staffing levels within CAMHS, have yet to be fully addressed. Commissioning arrangements for CAMHS have been strengthened, but a lack of capacity within the primary care trusts is hampering other progress, particularly within disability services.

51. Various strategies are helping children to gain a good start in life. The development of midwife-led delivery units within the acute hospitals is helping improve maternity provision, although Caesarean rates are above national averages. The pressure on capacity in the neonatal intensive care units is being reviewed to inform future service provision. Good multi-agency support around breastfeeding is available to parents, including teenage and other vulnerable mothers. A multi-agency maternity drug clinic serves 120 women a year, with follow-on support available through a voluntary peer support group. The needs of women from black and other minority ethnic groups are met in a variety of ways, although around 25% of women only seek support late in their pregnancy and the need for more interpreters is still being assessed. In localities where there are no dentists, children are able to attend one of four dental access centres across the city.

52. Several initiatives encourage healthy eating. Take-up of the Healthy Schools programme is increasing and set to meet national targets. Plans are in place for the authority to employ a dietician and provide training for school head cooks to further improve the quality of food available. All schools make clean drinking water available to pupils and breakfast clubs are provided in almost half the

schools. All schools deliver sex and relationship education, but the benefits of complementary projects provided by the youth service are not yet apparent. A drop-in clinic at the city's first extended school partnership is popular with children, particularly to gain advice on emotional issues. Participation in sport is at least satisfactory in all schools and excellent in some. Provision for physical exercise in some local communities is, however, difficult for young people to access.

53. Multi-agency initiatives to target health inequalities are aimed at reducing teenage pregnancy, drug misuse and smoking. Some projects have been implemented relatively recently and their impact on the health and well-being of young people is not yet clear. New criteria for projects have, however, been drawn up with the aim of evaluating their clinical effectiveness and value for money, making it easier to roll out effective projects across the city. Each youth project or centre delivers at least one drugs-related project annually and an early intervention service is being instigated to provide support on drugs-related issues for young people in schools. However, although a pilot of this service showed good results in supporting young people, it is not accessible to those who are not in school.

54. Children with chronic conditions are living longer. Arrangements for these children to make the transition into adult care, including where they require long term ventilation at home, are not planned for or managed consistently. However, joint clinics involving both child and adult services are held to ease the transition for children with cystic fibrosis. Specialist nurses provide a link to the community for specific conditions and a proposal to introduce a generic children's community nursing team, to help reduce time children spend in hospital and to reduce admissions, is included in the 2006/7 local delivery plan. After the end of a three-year lottery-funded project across the city, palliative care is now only being provided in areas served by one of the primary care trusts.

55. CAMHS services are soon to be centralised. For the new service, the current variability in provision between the north and south of the city is a significant challenge. CAMHS currently has insufficient capacity and is not readily accessible to many of the young people who need it. Access to services for children with mild needs have improved with the appointment of primary mental health workers and services for children with complex needs have been redesigned in line with service level agreements. However, there are gaps in provision to support early intervention in cases of psychosis and for 16-18 year-olds who do not meet the CAMHS criteria of being in full-time education. Transition arrangements to adult mental health services, especially for those with Attention Deficit Hyperactivity Disorder, are inadequate. When young people are referred to CAMHS, thresholds are open to varying interpretation among care teams and other agencies.

56. The arrangements to address the health needs of looked after children are good. Designated nurses have set up a system to ensure that all looked after children receive their health assessments in a timely manner and that health

action plans are followed up. There are plans to audit the healthcare arrangements for the children to demonstrate that the apparent health improvements are measurable. Looked after children have a useful single point of entry to mental health services through the 'Thinking Allowed' scheme and can access a variety of services in addition to or instead of CAMHS.

57. Support for children with learning difficulties and/or disabilities is adequate overall, with some good features. Early years services and speech and language therapy are good and young people with autism receive effective intensive support. Although care for children with moderate learning difficulties and/or disabilities more limited, there are plans to appoint a health worker to improve services for this group. While there is much evidence of joint and multi-agency working to support young people with learning difficulties and/or disabilities, outcome measures to evaluate the impact of developments are largely absent. Significantly, services tail off as children get older. The proposed reduction in usage of Church House, a health facility, has been much lamented by parents and carers despite the transfer of some services to a new purpose-built facility. Partners have acknowledged that this issue was not managed effectively initially, although subsequent efforts have given greater priority to informing and involving service users and carers.

Staying safe

58. **The work of all local services in keeping children and young people safe is adequate.** Multi-agency safeguarding arrangements for the most vulnerable children and young people are generally satisfactory, although the application of thresholds used to assess risk and children's access to social care services is variable. The new Safeguarding Board (which has replaced the Area Child Protection Committee) generally provides clear leadership on safeguarding issues, although the audit of the recommendations and standards set out in the Victoria Climbié Inquiry has not been updated over the past two years.

59. The Safeguarding Board has satisfactory arrangements in place for handling serious case reviews and has also carried out a regular programme of multi-agency case file auditing. Compliance arrangements for secure recruitment and vetting processes across agencies are largely satisfactory, but are not applied consistently.

60. Arrangements to inform children and young people about key risks to their safety are generally good and the council is developing strategies such as 'Safer Routes to Schools' schemes based on individual school travel plans. Primary schools are generally good at ensuring that pupils feel they are safe places. As part of the 'Safer Schools Partnership' to create a safer environment, police officers are placed in some secondary schools. The council is currently reviewing its anti-bullying policy with a group of stakeholders. Although bullying in schools is satisfactorily controlled and monitored and its incidence is generally low, there are some schools where it is higher. Instances of bullying and racial harassment

in schools are reported to the local authority and effective action is taken to deal with such incidents.

61. Targeted advice and support for children and young people most at risk of care, including the children of drug-using carers, are provided by the city-wide Child and Family Support Service and Team. Although a significant number of young people are involved in prostitution, various statutory and voluntary sector agencies have developed good and effective networking arrangements to help reduce the effects of sexual exploitation and its linkage with drug misuse. Reported levels of domestic abuse are high, particularly in some of the more deprived parts of the city. There are common procedures for reporting incidents where children are involved, but responses to these can vary. The strategic links between the Bristol Domestic Abuse Forum, the Safeguarding Board and the local preventive strategy, are also underdeveloped. Nonetheless, plans have been drawn up by the Domestic Abuse Forum to provide training for teachers on how to recognise and handle the effects of domestic abuse on pupils.

62. Levels of child protection registration and de-registration are generally in line with similar authorities. However, thresholds for responding to cases of emotional abuse and neglect are not clear and a minority of staff in agencies do not, therefore, recognise and refer cases as efficiently as they should. As a consequence, a small number of children experience cumulative neglect and emotional abuse before clear and appropriate safeguarding action is taken. This is particularly so in areas of high deprivation where patterns of recognition and referral are inconsistent. In some instances, the variability in response reflects under-capacity and, in others, poor management of casework by local care teams. Some attempts have been made to address the unevenness in social care caseloads across the city as well as the impact of social worker vacancies, but these have not as yet proved effective. Although multi-agency child protection training is generally comprehensive, the emotional abuse and neglect of children and young people has not been the subject of specific and focused training.

63. More broadly, the local strategic partnership has not yet developed a clear multi-agency understanding of the spectrum of accountability for preventive and safeguarding work. There are some good preventive services, but practice is not consistent across the city. Although preventive services such as Bristol Collaborative Service, Barnardo's Against Sexual Exploitation and the Youth Inclusion Support Panel are effective, the analysis of outcomes of these and other services to assist the commissioning of new services and the de-commissioning of services no longer required, is at an early stage.

64. All child protection cases and looked after children are allocated to a qualified social worker. There is, however, variability in the patterns of response when assessing and referring cases. Similarly, the level of managerial involvement in assessments and case planning is not consistent. Assessments are too often insufficiently focused on outcomes and the contribution of other agencies to the assessment process is not evident. A compliance and quality

assurance framework is in place, but the periodic audit of casework by senior social care managers has had limited impact on practice. There are some inconsistencies in the timely completion of reviews for looked after children, reflecting a shortage of staff in the independent reviewing team.

65. A determined attempt has been made over the past year to reduce the high number of looked after children and the flow of children into care placements outside the city. Action has been taken to stop the haemorrhaging of resources spent on expensive external placements, thereby releasing funding to support prevention and early intervention. Particularly through the new 'Access to Resource Panel', social workers have been encouraged to rethink practice and focus on more innovative interventions to prevent the need for care. Early evidence suggests that reduction in high cost care episodes and the work done to reunite children with their families are contributing to savings that can be used for further preventive work. There is good awareness overall of the safeguarding issues for looked after children and residential care staff and foster carers receive satisfactory safeguarding training. In some instances, however, foster placements continue to be arranged without care plans, key medical information or placement agreements being provided for carers.

66. Children and young people with learning difficulties and/or disabilities are properly recognised as being vulnerable to abuse and a significant amount of work has been done to ensure that all services who work with disabled children have sufficient understanding of their needs to take appropriate action. In cases where a disabled child or young person also has communication problems, appropriately trained staff are involved without delay.

Enjoying and achieving

67. **The overall contribution of services to helping children and young people enjoy their education and recreation and achieve well is inadequate.** The standards achieved by children and young people in national tests and public examinations up to the age of 16 are well below those found nationally and in similar authorities, and are unsatisfactory. In both primary and secondary schools, too many young people make insufficient progress in their learning. Attendance is poor and exclusions are high. In 2005, the achievements of many black and minority ethnic groups improved, although they remain significantly below those of their white peers. Support provided by the local authority has not had sufficient impact on raising standards and improving the quality of education. Within this overall negative picture, however, there are some more positive elements. For example, provision for the very small number of Traveller children and young people is adequate. Various initiatives also help the above average proportion of children and young people with learning difficulties and/or disabilities to achieve satisfactory outcomes. In some parts of the city, good links are developing between secondary and local supplementary schools.

68. The local authority has recently put in place more rigorous systems to support and challenge schools to improve. These include a more robust system of school self-evaluation developed in partnership with headteachers, better use of performance data and the introduction of coordinated teams to support school improvement. Procedures for identifying and supporting schools causing concern are now more robust and there has been a decline in the rate at which schools have been placed in formal categories. Support for weaker schools, although variable, is becoming more effective. However, the number of schools judged to have serious weaknesses or to be in need of special measures remains high compared to similar authorities. Coordinated arrangements for supporting school senior leadership teams are very recent and the impact of these strategies is not yet evident.

69. Pupils' school attendance is low when compared to the national average although targeted action for improvement, including analysis of attendance data, truancy sweeps and the issuing of penalty notices, have resulted in some improvement over a relatively short period of time. However, the rates of authorised and unauthorised absences remain high. The number of permanent exclusions has fallen in primary schools and at Key Stage 3, although it remains high for older secondary pupils. The rate of fixed-term exclusions is very high and this includes a significant proportion of black and minority ethnic children and young people, particularly at primary level. Overall provision for pupils permanently excluded from school is satisfactory and meets statutory requirements. Systems for monitoring exclusions are satisfactory. Compared to similar authorities, the reintegration of excluded pupils into mainstream schools is low. Arrangements for children and young people educated other than at school are satisfactory. A specialist pupil referral unit provides very effective support for pregnant teenagers and young mothers, and the Bristol Hospital Education Service provides good support for children and young people with physical and mental health needs. Appropriate arrangements are in place to monitor the educational programmes of learners educated at home. The support for young carers provided by the council and schools is inadequate as their needs are not widely enough understood and are not being sufficiently addressed.

70. The Early Years and Childcare Partnership was sensibly incorporated into the interim children's trust arrangements in December 2005. Parents and carers of young children receive good advice about the range of childcare and nursery provision available to them. There are sufficient early education and childcare places and an ambitious programme to establish children's centres in areas with the greatest level of need across the authority. Through the Sure Start initiative and the children's centres, parents and carers in the most disadvantaged areas can access a good range of quality support to help their children's early learning. There is a clear integrated strategy for early years' provision; the quality of the provision is good and promotes the development and well-being of young children effectively, helping them to make good progress towards the early learning goals. The children's centres provide a good range of multi-agency support that benefits young children with learning difficulties and/or disabilities.

They have established good relationships with parents and their good provision for adult learning includes accredited courses on child development.

71. Information for parents on admission arrangements for schools is clear. A major review of school places has recently taken place, resulting in the implementation of a clear strategy to remove surplus places in both primary and secondary schools by closing and/or amalgamating some schools. There is a substantial investment programme to rebuild and upgrade the quality of secondary school facilities.

72. A good range of recreational and voluntary activities is available for most children and young people. Schools provide young people with good opportunities for out-of-hours learning that enable them to socialise and develop in a safe environment. Extended school facilities are used well. The youth service provides a good range of targeted programmes for vulnerable groups, including young people who have been excluded from school. There are many opportunities for children and young people to become involved in music, arts and sporting activities, some of which are provided by the council's leisure and music services. However, some of the more disadvantaged areas of the city with a high proportion of young people are poorly served by recreational facilities.

73. The education support provided for looked after children is adequate with some good features. A programme is in place to improve the achievement of looked after children at ages 11, 14 and 16, but standards achieved remain low compared to similar authorities and nationally. Systems to track the progress of pupils within schools and those attending out-of-city placements have improved, but follow-up support is too frequently not proportionate to need. Support packages for young people at risk of exclusion are effective in helping them to remain in school. However, for almost half of the young people in residential care, provision falls below the recommended level. The attendance of looked after children is monitored closely but remains below average. Although arrangements to place looked after children in local schools are secure and effective steps have been taken to prioritise continuity in education when foster care placements are changed, some placements are not timely.

74. Children with learning difficulties and/or disabilities make satisfactory progress and their educational provision is adequate overall. The local authority is committed to inclusive education for these groups and, where possible, the children are included in mainstream education. The proportion of young people with statements of special educational need, although high, is slowly falling. There are some good opportunities for children and young people with learning difficulties and/or disabilities to be involved in leisure and recreational activities, both at school and in their local community, and these are well supported by voluntary agencies and the youth service. However, statements are issued too slowly and the range of relevant vocational courses available to the young people once they reach the age of 14+, is inadequate.

Making a positive contribution

75. **The work of all local services in helping children and young people to contribute to society is good.** Children and young people are provided with a good and varied range of support which assists them in developing socially and emotionally. The majority of children and young people enjoy living in their local area and become readily involved in activities in school or the local community. Information on activities is well promoted and it is easy to find things to do. Local communities, such as Speedwell, provide a programme of activities during school holidays. Sure Start, voluntary organisations and family link workers provide effective support to new parents and carers in parenting skills or when difficulties in relationships arise. There is a strong emphasis on inclusion and equality and schools review their inclusion practice on an annual basis. Area Special Educational Needs Co-ordinators work well with early years providers and, overall, there is effective multi-agency support for children and young people with learning difficulties and/or disabilities.

76. Good multi-agency project work contributes to an effective range of support for children and young people who are disaffected or experiencing difficulties, although outcomes are not precisely evaluated. One well coordinated and monitored multi-agency response project (Project X in Knowle West) provides a good individualised support programme for young people. Some projects (for example, the Junior Windsor Fellowship) are aimed at particular communities or minority ethnic groups. These focus effectively on raising self-esteem and achievement and address particular community concerns. The Primary Care Trust and the Brook Advisory Service offer 'drop-in' services in some schools and youth centres and provide good, confidential, health related advice to young people. The University of the 1st Age has been very effective in training a large number of young people as peer-mentors through a range of summer 'challenge' activities.

77. Support for children and young people in managing changes and responding to challenges in their lives is good. There are good induction arrangements across all phases of education and schools provide effective guidance for young people on later education and life. The revised transition arrangements for 14 year-olds with learning difficulties and/or disabilities are also good. The Ethnic Minority Achievement Service and education welfare officers work well together to support refugees and asylum seekers and a number of projects effectively address the challenges faced by young people from black and minority ethnic backgrounds. Support for looked after children in school is good as a result of the effective liaison with social services and other partners. However, support for young carers is unsatisfactory. A voluntary organisation runs a support group for 35 young carers but has a waiting list of 40. The support offered is good, but it is unable to reach sufficient young people due to lack of funding.

78. Opportunities and arrangements for children and young people to be involved in decision making and supporting the community are very good.

Various mechanisms are in place for gathering young people's views through the youth service and these are well supported by the young people. Participation officers are increasing their work with looked after children in recognition that this group requires greater attention. Most schools have a school council and a number of inter-school councils are in place, through which young people can raise concerns about wider community issues such as vandalism and litter. An effective young people's select committee has worked well to develop the terms of reference for the youth parliament and elections to this have now been held. Young people have positively influenced many local authority and community decisions, for example, the design of a BMX track at Hillfields, development of a performing arts room in Hartcliffe, a poster campaign on violence in Southmead and various facilities in Easton. Connexions also effectively involve young people in shaping its service and ensuring that it meets their needs.

79. The 'R Voice' magazine provides a good opportunity for looked after children to share their experiences and ideas with others in similar situations. Mentors and personal advisers are increasingly effective in encouraging them to contribute to their reviews and planning meetings. A number of children and young people have contributed to projects, including the making of a DVD which explains the services available. Effective work has been undertaken with young people with learning difficulties and/or disabilities who require alternative methods of communication and a project is in place to address their needs.

80. Support to help children and young people behave responsibly is good and is well supported by multi-agency action. Schools use activities such as circle time, drama, peer mentoring and the Improving Behaviour in Schools project to good effect. Children and young people's concerns about anti-social behaviour are acknowledged and steps are taken to bring about improvements. The police, schools and other partners work closely together and effective work has been undertaken in conjunction with local communities. Acknowledged local hotspots, particularly around the city centre, have been successfully targeted for specific action.

81. Action taken to reduce offending and re-offending is satisfactory and there has been a 5% reduction in first time offences. Although overall drug abuse by young people is high, the incidence of use is stabilising. More young people are receiving treatment and there is a decrease in the use of Class A drugs. The restructuring of the youth offending team has been successful and effective early and preventive action by the police and other partners through the youth inclusion panel and YISP is having a very positive impact on reducing offence rates and the escalation of more minor offences. Increasing numbers of young offenders are participating in education, employment and training, although the number remains below the national average. The number of final convictions and warnings for looked after children is also too high.

Achieving economic well-being

82. **The work of all local services in helping children and young people to achieve economic well being is adequate.** Many young people have access to a good range of initiatives to help prepare them for working life, although not all have the opportunity for timely and appropriate work experience. Young people make good use of information, advice and guidance services to help them make informed choices. The Connexions Partnership and specialist voluntary organisations, such as 'Off the Record', provide much effective and well targeted support for the most vulnerable groups. The Care and After Team has undertaken useful work to re-engage young people in learning post-16. A diverse range of initiatives, for example at the Park in Knowle West and at City of Bristol College, ensures young people excluded, or at risk of dropping out of education, remain engaged in learning. Young people value the support they receive.

83. The new 14–19 strategy provides a detailed framework for post-14 development. Progress has been made in addressing some longstanding weaknesses, with moves towards greater collaboration between institutions. However, the quality of provision remains too variable. The recent reorganisation of the Bristol Campus (14–19 partnership) has helped to improve coordination. Initiatives to broaden the curriculum, for example through vocational courses, work-based learning and the use of alternative accreditation frameworks, have increased flexibility and learners' choice. The three locally-based area partnerships are at different stages of development and the rate of progress is variable. Links with employers are not yet fully developed, but work to identify future employment opportunities and skills gaps, particularly in retail and construction, is well underway. The Ablaze Partnership, based in the education action zone, is a good example of innovative business and education links.

84. Parents and carers receive practical help and advice in obtaining benefits and improving their life and work opportunities. The clear strategic priorities for early years and childcare services ensure a focus on early intervention and support for vulnerable families. The number of early years places is increasing broadly in line with the national trend, although there is an uneven distribution across the city. Admissions criteria for full-time nursery places for three and four year olds prioritise children in need. Schemes, including Positive Futures, provide well targeted and affordable holiday and after-school activities. Successful action has been taken to break down barriers between home and school, for example in Knowle West and in the Somali community. Outreach and family link programmes help parents return to work or study. Parents and carers of older teenagers are generally less well informed about the opportunities available.

85. Community regeneration programmes are well targeted and underpinned by a comprehensive analysis of need. They have had a positive impact on the lives of children and young people in some of the most deprived areas, such as Knowle West and Lawrence Hill. The neighbourhood renewal project linked to

the city academy has contributed to some improvement in the attendance and attainment of black and minority ethnic children and young people. However, the overall impact of neighbourhood renewal programmes, particularly on education and health outcomes, has been insufficient and/or not sustained. While many initiatives have developed in response to locally identified needs, too little attention has been given to evaluating these to ensure that lessons learnt are used to inform developments across the city. The recently revised neighbourhood renewal strategy places a much greater emphasis on outcomes and evaluation, although it is too early to judge its effectiveness.

86. The shortage of affordable housing affects many young people who want to live independently. Those with the most complex needs, challenging behaviour or chaotic lifestyles face particular difficulties in finding a decent place to live. Nevertheless, accommodation is found for care leavers, young offenders and other vulnerable groups and successful work is undertaken to mitigate tenancy problems. Effective partnership approaches, based on a thorough analysis of need, support young people and families who are homeless or require housing services. A significant minority of families with young children, however, still live in areas with the greatest concentration of poor housing.

87. Vulnerable young people have adequate support to enable them to achieve economic well being. Appropriate policies are in place to ensure care leavers and young people with learning difficulties and/or disabilities have pathway and transition plans at age 16. Young people who are looked after receive good support from the Care and After Team, including mentoring and to assist life-skills development. Work is in hand to further improve the allocation of housing and support for these young people where placements break down. Young people with learning difficulties and/or disabilities make good use of direct payments which enable them to purchase tailored and flexible packages of services. This is a key development area for the disabled children's team, which has exceeded its targets. Some service users are frustrated by budget constraints which can lead to excessive delays in commencing payment. However, those on the scheme are very positive about the opportunities it affords. The Connexions service makes a good contribution to transition planning. The proportion of young people in care with learning difficulties and/or disabilities who are in education, employment or training is above the national average and the range of provision for them is increasing. A residential children's home provides specific and intensive care for 14-17 year-olds in this group as they prepare for independent living.

Service management and capacity to improve

88. **Although, the management of services for children and young people is adequate overall, there are some important weaknesses.** The council demonstrates strong ambitions, reflected in high aspirations for children's services, including a clear intention to improve outcomes and to integrate services for all children. Some services are performing well, for example, the early years, youth and youth offending services, but this is offset by significant

weaknesses in the other educational services and variability in the quality of children's social care. In the weaker areas, ambitions are not leading consistently to improvement and overall performance lags behind similar authorities. Management of social care is adequate, but there is some inconsistency in the way services assess and respond to young people's needs. Actions are being taken to make strategies for children more coherent, but these have yet to make a consistent impact on the outcomes for young people. The council is taking the necessary steps to meet its statutory responsibilities.

89. There is a strong commitment from all agencies to improve children's services. It is a major priority for the council and has strong political and corporate support. The council's clear ambitions for the services are reflected in its corporate strategies and these priorities will inform the children's and young people plan. Its arrangements for consulting children and young people on the developing strategies and services are good. Partnership working with key agencies is developing, but a shared understanding of vision, priorities, needs and roles and responsibilities is not yet secure and not all partners have signed up to integrated working.

90. Prioritisation is adequate. The council and some key partners prioritise well, although there are some weaknesses in translating priorities into action plans and identifying responsibilities, timescales and milestones. The understanding of local needs is good and the council and its partners have produced a thorough analysis of children and young people's needs and some good community profiling. The executive of the Children and Young People's Trust Partnership has representation from all the major statutory and independent partner organisations including voluntary and community groups. It has begun to develop a unified vision, terms of reference and structures for the new children's trust.

91. Plans for translating current ambitions and priorities into action are still being developed. At the time of the review, the transitional plan to support the process of integration was at the formative stage and many unanswered questions had still to be addressed. However, across education, social care and health services, many change processes are evident. A range of mechanisms has been put in place recently to raise educational standards in both the short and longer term. Better relations with headteachers and governors and improvements in arrangements to support and challenge schools reflect the improved and more focused strategic leadership of the council's education department. Substantial investment has also been made to improve secondary school facilities. Health priorities are now better focused on the needs of children and young people and services are currently being reconfigured to meet these needs. Children's health services are in the process of significant change, with services being centralised under one NHS hospital trust. For children's social care, the council has only recently embarked on reviewing its service mix to reflect a greater emphasis on preventive services.

92. There are some good examples of multi-disciplinary working, for example, the Barnardo's Against Sexual Exploitation at St. Pauls and Tyndalls Park, which are meeting locally determined needs. The development of supplementary schools and children centres is impressive, as is the work of Sure Start and services provided by family link workers. The neighbourhood renewal programmes are well targeted and underpinned by a comprehensive analysis of need, although individual projects have not been sufficiently evaluated for their impact on children. Although a sharper focus on local planning is emerging, a clear and strategic overview and coordination of the work of different services is still lacking. Established structures, for example for the pooling and aligning of budgets with other key agencies, are limited. The council is, however, developing formalised governance arrangements for the CAMHS partnership.

93. Overall, the city council has adequate capacity to deliver the current children's services arrangements, although in children's social care, staffing issues in some of the more challenging parts of the city are affecting the quality of service. In education, the council's recently developed recruitment and retention strategy has been effective in reducing teacher vacancies.

94. Commissioning and joint commissioning of children and young people's services are being developed and are being linked to key priorities and the need to improve case management. There are examples where strategic commissioning is in place through CAMHS and Bristol Collaborative Service, but this is still in its infancy. The council has, however, had some success in procuring services such as block contracts for emergency placements and the purchasing of services for children with complex needs.

95. Financial management is adequate and financial discipline, budget management and control processes are all robust. The necessary corrective action is being taken to deal with current projected overspends in children's social services. However, the medium term financial strategy does not fully address planned and forecast service needs.

96. Although corporately the council is strengthening its performance management framework, arrangements to manage performance across all children's services are presently inadequate. Corporate monitoring is becoming more effective, but it is not yet securely embedded within either the education or children's social care departments. There is a clear commitment to improve arrangements to foster a performance management culture and a common framework is developing. There are also some good examples where resources have been redirected to improve performance, for example in nursing looked after children and to support the youth service.

97. The quality of management information across the council's services for children is generally poor. The education and social care departments use different performance management processes. Strategies to ensure service delivery are inconsistent and good service delivery is over-reliant on individual managers and staff. The systematic use of complaints, performance information

and user feedback to inform and improve service delivery and future service planning is limited. Scrutiny arrangements within children services are not yet sufficiently challenging. Processes for monitoring, evaluating and reviewing the impact of local projects and initiatives are underdeveloped.

98. The council is not achieving good value for money for children and young people. The costs of many key services within education and social services are higher than other councils, and outcomes are variable. For some priority areas, such as school improvement, high spending has not yet been reflected in improvements in either service delivery or performance. The council has, however, begun to sharpen its focus on value for money, including targeting areas of high spending and poor performance for greater scrutiny.

99. The self-assessment submitted by Bristol as part of this review provided a reasonably accurate evaluation of its strengths and weaknesses, including acknowledging the shortcomings in young people's educational achievements. However, it overestimated the city's capacity to address the difficulties identified and to sustain the momentum of successful recent developments. Although Bristol has put in place interim arrangements signalling its intentions to develop an integrated children's service, there is not yet a common view among partners at either strategic or operational level on how and at what pace this should develop. The weight being placed on the shoulders of the director of children's services (designate) to raise standards in schools while moving forward the integration agenda is considerable. Staffing resources to match the requirements of the new integrated service are also not yet secure.

100. A consultant has been commissioned to support the implementation of the integrated children's service and the council is reorganising its staffing structure to match the new children's agenda. However, the council's capacity to maintain the momentum for change is limited by underdeveloped workforce planning and variable human resources support. Uncertainty about the implications of the changes is also affecting staff confidence. Much of the activity represents 'work in progress' and the council still has a long way to go to achieve its objectives. Although improvements have recently been made, these are fragile.

101. Given the poor educational outcomes, the nature of some of the social care issues that need addressing, the weaknesses in performance management and workforce planning and the uncertainty surrounding the implementation of the integrated children's service, the current capacity of the city council to improve outcomes for children and young people on its own is inadequate. The council's track record over many years in improving outcomes in education is poor and deep-rooted problems must be overcome if there is to be sustained improvement. In children's social services, management of change has been slow. The council now has a good understanding of what needs to be improved, but is unable to demonstrate consistently that its approaches are leading to real gains for young people.

102. **The council and its partners together have adequate capacity to secure the improvements for children and young people that are required.** The contributions made to improving the outcomes for children by other agencies, at both strategic and operational levels, are significant. Bristol's capacity to improve services depends upon the council's ability to consolidate and build upon these partnerships. Alongside Bristol's successful services, there are many others, including ones provided by the council, where there are clear signs that the city's collective commitment to make things better for young people is being rewarded by flourishing 'green shoots'. These appear to be indicators of real improvement beginning to take root. Ultimately, the extent that this is the case will be the true test of Bristol's capacity to secure and sustain the best deal for children and young people in the city.

Annex: The children and young people's section of the corporate assessment report

1. Bristol City council and its partners achieve mostly adequate outcomes for children and young people in Bristol. Most children and young people are healthy and safe and those most at risk are adequately protected. However, standards achieved in education are much too low and inadequate.
2. Challenging ambitions to improve the life chances for children and young people have been set out by the local strategic partnership. Improving education and work skills for children and young people and improving health and well-being are key priorities in both the council's 2006-9 corporate plan and the community strategy.
3. Services to support children and young people are of mixed quality and are having uneven effects on improving outcomes for children and young people. Though many are effective, performance management arrangements are typically underdeveloped and the services thereby find it very difficult to demonstrate their impact.
4. Children most at risk from abuse are mostly well protected through satisfactory multi-agency safeguarding arrangements. However, the general quality of social care assessment and care planning is too variable and the experiences of children receiving these services vary widely across the city. Determined action to reduce the number of looked after children is starting to be effective, reflecting moves towards a more preventive approach towards young people at the edge of care. Attempts to commission and re-balance services to reflect this shift are nonetheless at an early stage. The incidence of bullying within schools is generally low and monitored satisfactorily.
5. Although helping children and young people to enjoy and achieve is a high priority for Bristol, the efforts of the council and its partners have had little impact. Early years provision is of good quality, but by the age of 16 educational standards are poor. The proportion of young people gaining five or more GCSE passes at grades A*-C is low. Many children enjoy school, but attendance levels are poor. Exclusions from school, especially for a fixed period, are high and include a high proportion of children and young people from black and minority ethnic backgrounds. Children and young people with learning difficulties and/or disabilities make relatively satisfactory progress. There remains a high number of schools with serious weaknesses or in need of special measures.
6. There is good support to help children and young people to take personal responsibility and to contribute to their communities. Opportunities for children and young people to be involved in decision making on issues which affect them are good. Good multi-agency partnerships are in place and effectively address behaviour issues through school-based projects and personalised support

programmes. Action taken through the Youth Inclusion Programmes and Youth Inclusion Support Panels is also effective in addressing anti-social behaviour.

7. Despite the weaknesses in education up to the age of 16, opportunities for young people to prepare for working life are adequate. The new 14–19 strategy provides a detailed framework for development. Progress has been made in addressing some longstanding weaknesses and, compared to similar cities, a high and increasing proportion of 16-19 year-olds engage in education, employment and training. There remains, however, a significant core group of young people with low expectations about what education, training and employment can offer. Success and retention rates in local colleges are generally above the national benchmark, but in school sixth forms, achievement remains below average. Participation in work-based learning is increasing, but patterns vary considerably across the city. The shortage of affordable housing affects almost all young people and those with complex needs face particular difficulties in finding a decent place to live.